INSTRUCTIONS FOR COMPLETING MONTANA BOARD OF HOUSING

REVERSE ANNUITY MORTGAGE LOAN APPLICATION

Attached is the form of the application to be used in applying for a Reverse Annuity Mortgage Loan (RAM). The information requested will be used by MBOH in determining the eligibility of the borrower(s) for a RAM loan.

We have enclosed a sheet entitled "How To Fill Out The Application" which should answer most questions about the application. This sheet will also help you see whether you are likely to be eligible for the program.

Applications are handled on a first-come, first-served basis, based on the funds we have available for the designated pilot program. We cannot, however, make any guarantee on how long funds will remain available.

Submitting the application does not mean that you are required to take the loan if offered. You will only have to make a final decision after your home is appraised, and you have received an offer of a loan commitment from Montana Board of Housing.

We will review the completed application in regard to the eligibility requirements, and notify you, in writing, of the results of our review.

It is necessary that potential borrower(s) complete a reverse annuity mortgage counseling program in order to submit an application. The counseling network is provided through the Montana Aging Services Network, and the application may be completed during the counseling session.

Reverse Annuity Mortgage Program Specialist Montana Board of Housing PO Box 200528 301 South Park Avenue Helena, MT 59620-0528 1-800-761-6264 (406) 841-2840

http://housing.state.mt.us/Hous_Prog_Elderly.html

Revised: March 21, 2005

MONTANA BOARD OF HOUSING (MBOH) APPLICATION FOR REVERSE ANNUITY MORTGAGE LOAN (A.P.R. 5.0%)

Borrower NameSSN			DOB <u>/_/</u> Age			
Co-E	Borrower NameSSN _		DOB <u>/_/</u> Age			
	perty Address: Street					
Maili	ling Address:	Montana 7	?in			
City, Montana Zip						
Hom	ne Tel. No. (406)					
Prop	perty Legal Description					
			_			
Lot S	SizeEstimated Property Construction	n Date (Year)				
1.	Amount of loan applied for: \$	(Max	ximum is \$100,000 ; minimum is \$15,000)			
2.	Cash Advance, if any \$	(Max	ximum \$10,000 with some exceptions)			
3.	Names, birth date, and employment status of all other persons not listed above who reside in the household					
4.	Are all Borrowers currently living in the home? Yes No Specify which are not					
5.	Manner in which title is held (sole ownership, joint tenants in common, joint tenants with rights of survivorship).					
	(If there is a Co-Borrower, the Property must be owned jointly with rights of survivorship)					
6.	Indicate the number of dwelling units in the Property	<u> </u>				
7.	Is the Property a condominium? Yes No	FHA\ VA Condomini	um Number #			
8.	Is there a mortgage or other lien on the Property? Yes	No If YES, list w	hat type of lien and how it will be cleared.			

10.	closing of Company Renewal I	Do you carry hazard insurance on your property? Yes No (Hazard insurance must be in force at or before closing of the RAM loan). If yes, complete the following: Company Policy Number Amount of Coverage\$ Renewal Date Insurance Agent Agent's Phone No (Please attach copy of current Declarations Page from your hazard insurance policy.)				
11.	. Did Borrower(s) file a federal income tax return for the previous year? Yes No(If yes, a complete copy must be attached to application.)					
12.	Annual Fa	Annual Family Income (Anticipated total income from all sources for the subsequent 12 month period from application.)				
	A. B.	Total Income per tax return (or total income of a taxable nature and its sources, if no return was filed) Add, any investment or business loss which was netted out of total income above	<u>\$</u> <u>\$</u>			
	C.	Add, non-taxable income, such as:	•			
	D.	Social Security Municipal bond interest	 			
	E.	Other (Please specify)	\$			
	F.	Less Total Allowed Medical Expenses, if applicable	\$			
	TOTAL ANNUAL FAMILY INCOME					

14.	 a. Copy of trust i b. Copy of most c. Copy of curre d. Copy of comp e. Copy of verific 	lowing to your RAM applicated indenture/warranty deed recent paid real estate tax in declarations page from hilleted counselors checklist cation of income sheet if applicable	receipt	nce policy		
15.	Application completed	during counseling session?	Yes	_ No		
	Address	Ci	ty	Phone #_ <u>(406)-</u>		
		(Please print)				
Date	of Counseling Session_					
Prope The cowne	erty, and represent that original or a copy of this rs of the Property, and	gned have applied for the loa all statements made in this a application will be retained be intend to occupy the Prope through the counseling prov	application are by the MBOH, erty as their p	e true and are made even if the loan is in rimary residence.	for the purpose on not granted. The The Reverse Ann	of obtaining the loan. undersigned are the
Borro	ower	Date				
Co-B	orrower	Date				
Coun	selor	Date				

HOW TO FILL OUT THE APPLICATION

Please Type or Print Legibly

- A. Fill in the names, social security numbers, dates of birth (month, day and year) and age of yourself, your spouse, if married, and any other title holders to the property.
- B. All borrowers, co-borrowers, title holders, and spouses of borrowers and title holders must be at least 68 and a co-borrower (Some exceptions may apply) to be eligible for the program.
- C. Fill in your address and telephone number. The property address must be your principal residence and the property for which you are applying to mortgage.
- D. Item #1 Enter the amount of the loan you are applying for, keeping in mind the noted maximum and minimum loan amounts.
- E. Item #2 Indicate the amount of cash advance you are requesting. If none, please so indicate.
- F. Item #3 List the Name, Birth date, and Employment Status of all Adults living in the home other than the Borrower or Co-Borrower if any.
- G. Item #4 Complete with a yes or no. If no, indicate which borrower is not an occupant.
- H. Item #5 Indicate rights of survivorship if there is a co-borrower. Title to the property must be held as joint tenants with rights of survivorship.
- I. Item #6 Complete with number of dwelling units in the property. Eligible properties are one-to-four family dwelling units.
- J. Item #7 Complete as to whether the property is a condominium. Condominium units are now eligible in the program, but must have a <u>Condominium registration ID number</u>.
- K. Item #8 Check "Yes" or "No". <u>If you check "Yes"</u>, indicate type and amount of existing mortgage or lien in the available space. You may apply for the program if there is an outstanding mortgage or lien on the property. However, the property must be free of any mortgage or lien at loan closing. A one-time lump sum advance, on a case-by-case basis, is available to clear liens or pay off bills at the time of loan closing.

L. Item #12 - Total family income - The income of all adult members of the household, other than full time students. The income is the amount of anticipate total income from all sources for the subsequent 12-month period from application. This includes non-taxable income such as social security and municipal bond interest. Any investment or business losses cannot be subtracted.

If you filed or will file a federal income tax return for last year, the amount in line A. should be adjusted gross income shown on that return, or the total from all returns if different members of the household filed separately.

If you did not file a federal income tax return last year, line A. should include any Income which would have been taxable if you had been required to file a return. This includes earnings, pensions other than Social Security, rent received, and any interest, dividends, capital gains or other investment income which is not tax-exempt.

The Other category, line E. includes all tax-exempt income not listed else where, including government benefits other than Social Security.

M. Item #13 – Enter the total number of people living in the household.

If your annual family income as completed in Item #13 exceeds the limit for your household size, you will be ineligible for the program.

The Annual Family Income must not exceed the following:

1 person household	\$19,140
2 person household	\$25,660
3 person household and up	\$32,180

Remember to sign and date the application, and return it to:

Montana Board of Housing 301 S. Park Ave, Suite 240 PO Box 200528 Helena, MT 59620-0528.